



MISSOURI GAMING COMMISSION
EXCURSION LIQUOR LICENSE
RENEWAL APPLICATION

LIQUOR LICENSE NUMBER:

LICENSE EXPIRATION
DATE:

RENEWAL PERIOD:

TO:

NAME AND LOCATION OF CASINO:

MANAGING OFFICER:

APPLICANT NAME:

ADDRESS:

ADDRESS:

CURRENT BUSINESS STRUCTURE:

Applicant represents that there has been no change, except as otherwise stated, relative to the application or his business since the applicant's initial application except for any changes the notice of which has already been filed with the Director.

Applicant acknowledges that its license will be subject to current provisions of the Missouri Revised Statutes and the Rules and Regulations of the Missouri Gaming Commission, and that failure to conform thereto will subject its license to suspension or revocation by the Director.

Applicant further agrees that it will permit the Director and his agents to inspect at any time the licensed premises and every part of the building and plot of ground under its control and upon which the licensed premises are located, and also any place where applicant may have intoxicating liquor and non-intoxicating beer stored.

STATE OF MISSOURI)ss.

)

County of _____)

I, _____, of lawful age, being first duly sworn upon
(Managing Officer)

my oath, depose and say that I have read this application and that I fully understand the same; that I am an authorized agent of the applicant and that I know the contents of the application and the statements contained therein and that the same are true of my own knowledge.

Managing Officer

Subscribed and sworn to before me this _____ day of _____, 19____

Notary Public

My Commission Expires: _____

MISSOURI GAMING COMMISSION
EXCURSION LIQUOR LICENSE
RENEWAL APPLICATION
NON-GAMING SERVING LOCATIONS

LOCATION:			
HOURS:		TO:	
LOCATION:			
HOURS:		TO:	
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